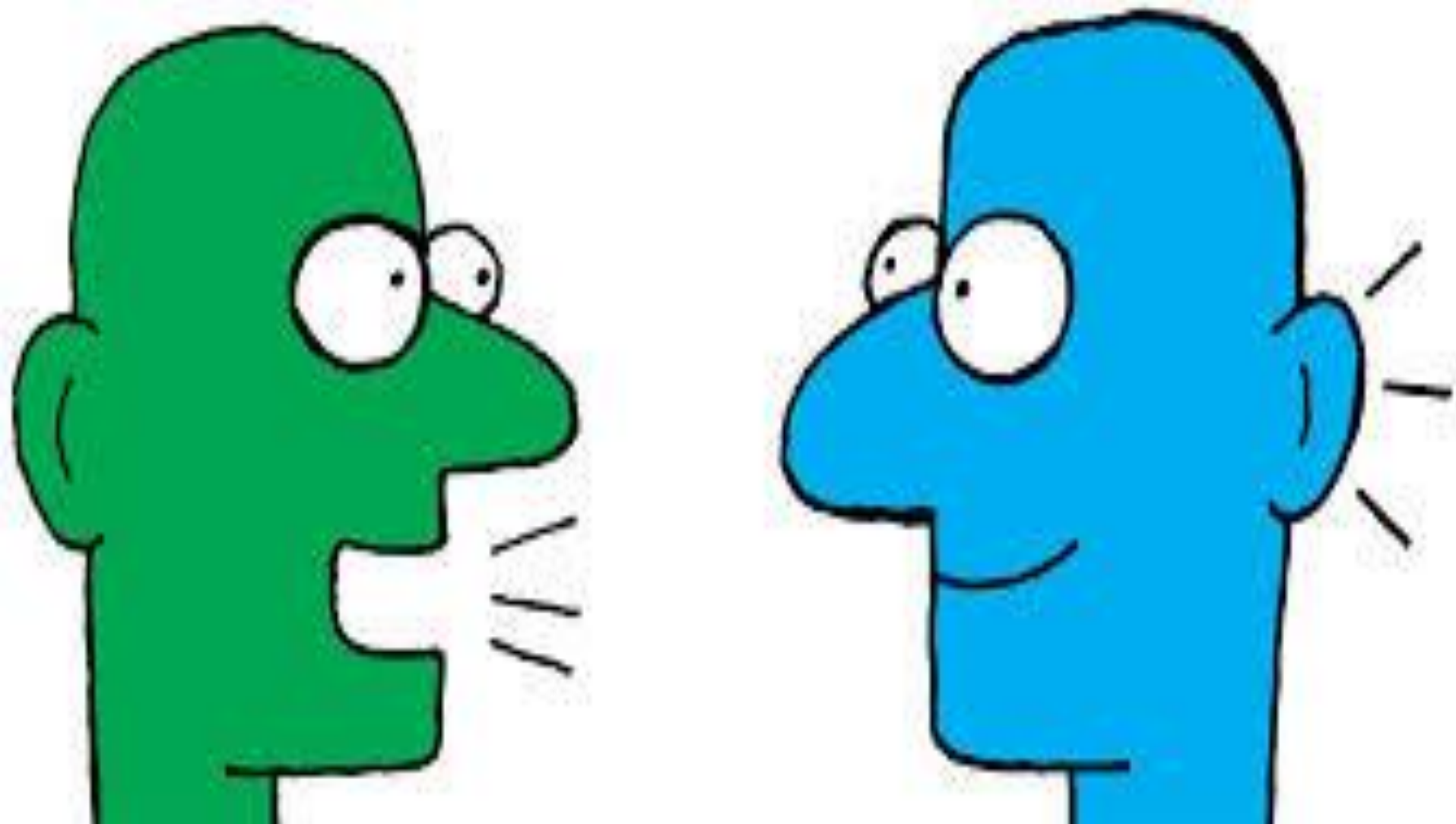






The Concept of Communication Skills

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Objectives

By the end of the session, students will be able to:

- Define Effective Communication
- Discuss the significance of communication in healthcare
- Enumerate the tools of communication and elaborate with examples
- Relate effective communication skills to the field of medicine (doctor Patient communication)
- Demonstrate the role of listening in doctor patient relationship

Outline of the Session

1. Define communication
2. Need of communication
3. Models of communication
4. Tools of communication
5. Non verbal communication
6. Role of listening

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Definition ??

- “.. the act or **process** of using words, sounds, signs, or behaviors to express or **exchange information** or to express/share your ideas, thoughts, **feelings**, etc., to someone else..” Merriam Webster Dictionary
-To reach a **shared understanding**....
- One Way vs two way Communication

One-way vs. Two-way Communications

One-Way Communication

- a person sends a message to another person and no questions, feedback, or interaction follow

- n Good for giving simple directions
- n Fast but often less accurate than 2-way communication



Two-Way Communication - the communicator & receiver interact

- n Good for problem solving



Vertical and Horizontal Communication

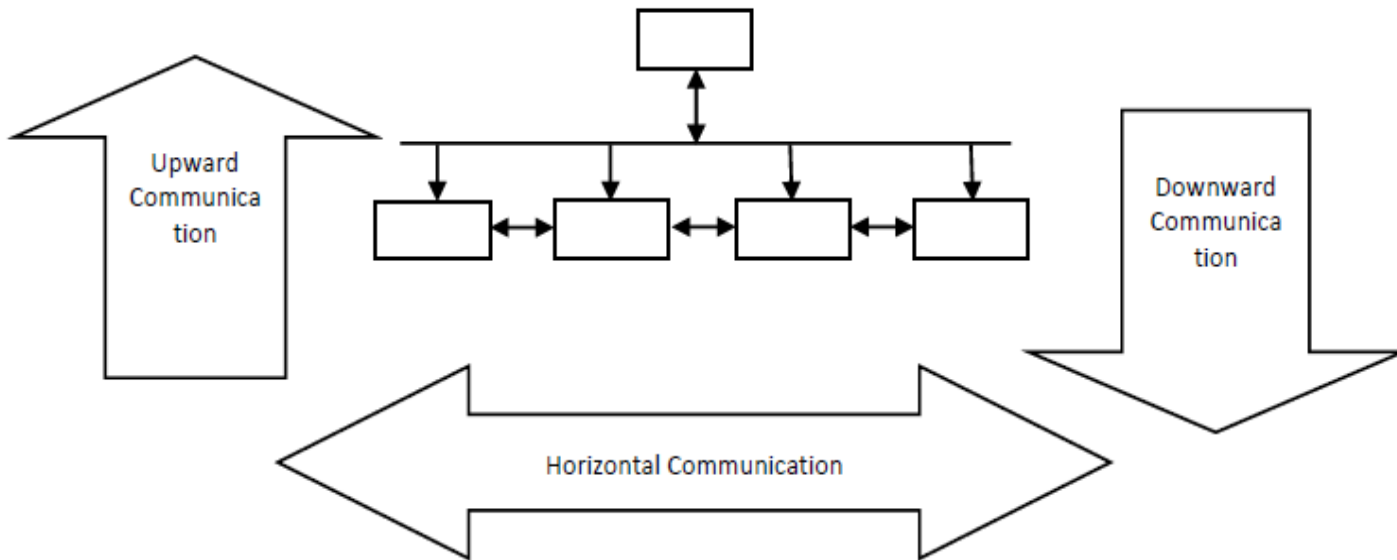


Figure 1. Downward, upward, and horizontal communication.

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Need for Communication

- Doctors are thought to perform around **200,000 interviews in a professional lifetime**
- All patients irrespective of **race, gender and social class are entitled to good standards** from their doctors.
- The essential tenets underlying this good practice are: **professional competence, good relationships with patients and colleagues, and thinking ethically about decisions regarding patients and colleagues**

Reference: Sample chapter on communication skills and ethics from revision notes for MRCP paces

Ineffective communication

- Ineffective communication is reported as a significant contributing factor in **medical errors and inadvertent patient harm**.
- In addition to causing physical and emotional harm to patients and their families, adverse events are **also financially costly**

Reference: "Promoting effective communication among healthcare professionals to improve patient safety and quality of care" VQC – A guide to improving communication among healthcare professionals-2010

Doctors need communication skills in a wide range of different contexts !

- Focus on communication skills in the clinical context

ALSO ...

- to present evidence in court
- to communicate research findings
- to write more generally for journals and magazines
- to talk to the media
- to determine how medicine is presented to the public and to the legislature

The Lothian University Hospitals NHS Trust

... asked patients for their views on communication issues:

- 60% complained about a **lack of involvement** in decisions about their care
- 60% said they were given **no information** about resuming normal activities after treatment
- 46% said they were given **inaccurate information** about how they would feel after treatment
- 43% said **their home situation** was not considered at discharge
- 33% said they had been **given no explanation of test results**
- 31% said they had **no opportunity to talk** to the doctor
- 23% complained of **nurses and doctors saying different things.**

Better Communication ...

Compliance



**People don't care how
much you know,
until they know how
much you care.**

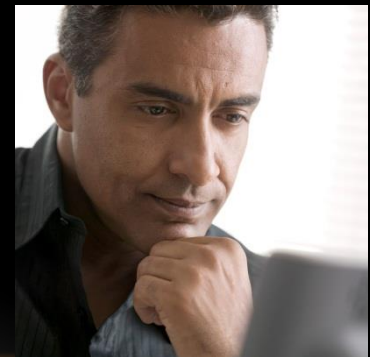
Lewis Barnett, MD
UVA Family Medicine

Good communication is like oxygen.

- When there's plenty of it in the air, we don't even notice it. But when it's lacking, all other systems fail – we can't function.
- Without good doctor-patient communication, our medical tools are weakened or become useless.

Need because ...

Benefits of
better
Interpersonal Communication
to Doctors ?



Need because ...

Benefits of better Interpersonal Communication **to Patients**



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Elements of effective communication?

- In healthcare, effective communication involves arriving at a **shared understanding of a situation** and in some instances a shared course of action.
- This requires a wide range of generic communication skills, from **negotiation and listening**, to **goal setting and assertiveness**,
- and being able to apply these generic skills in a **variety of contexts and situations**

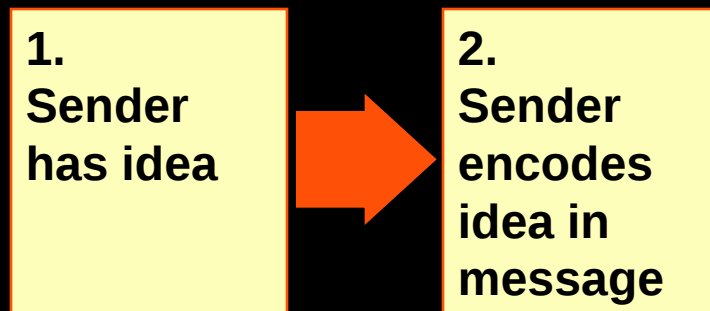
The Communication Process

Basic Model

1.
Sender
has idea

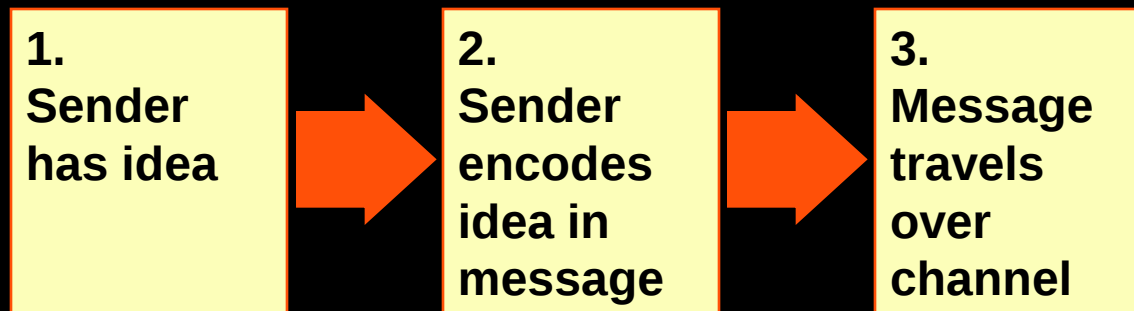
The Communication Process

Basic Model



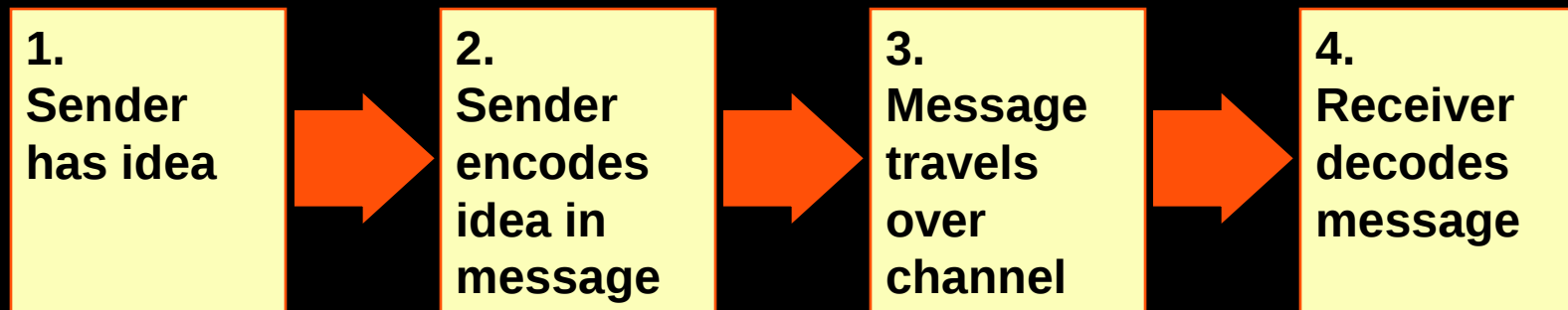
The Communication Process

Basic Model



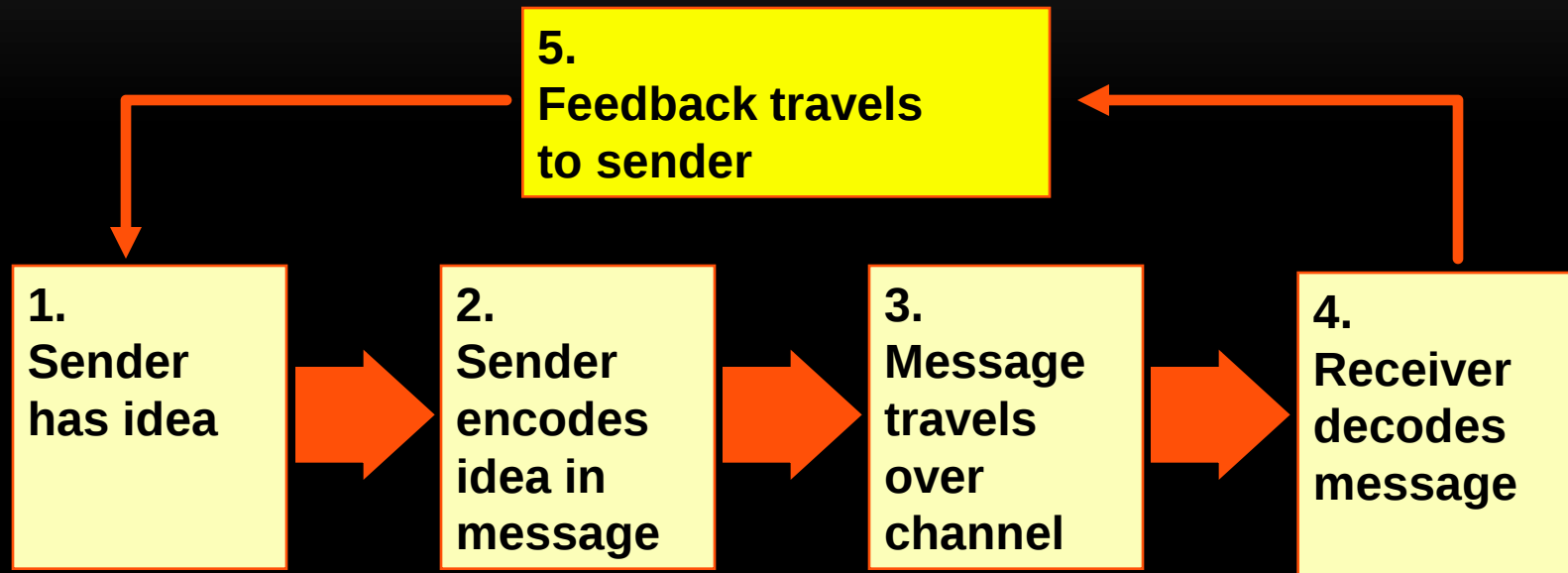
The Communication Process

Basic Model



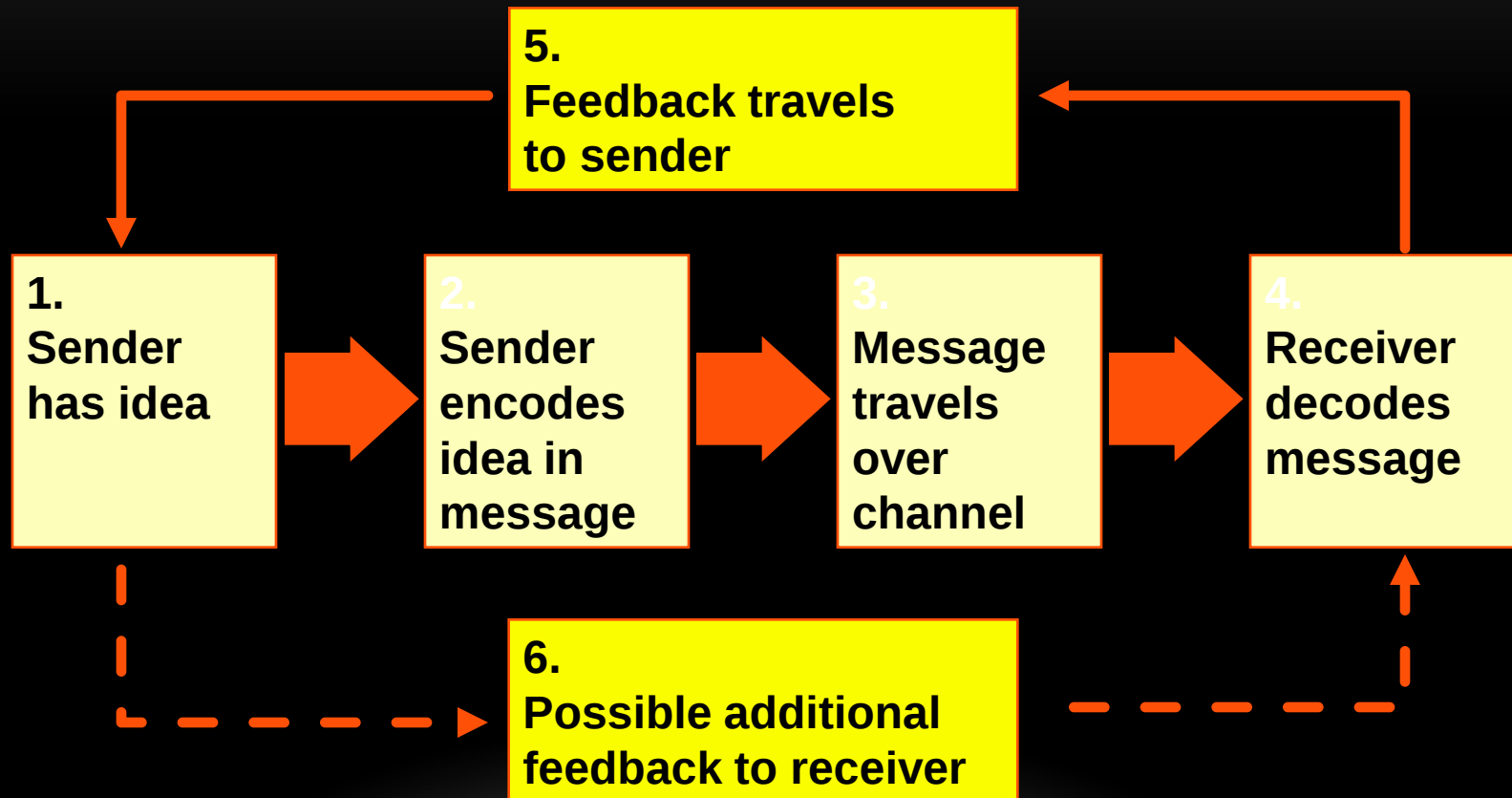
The Communication Process

Basic Model

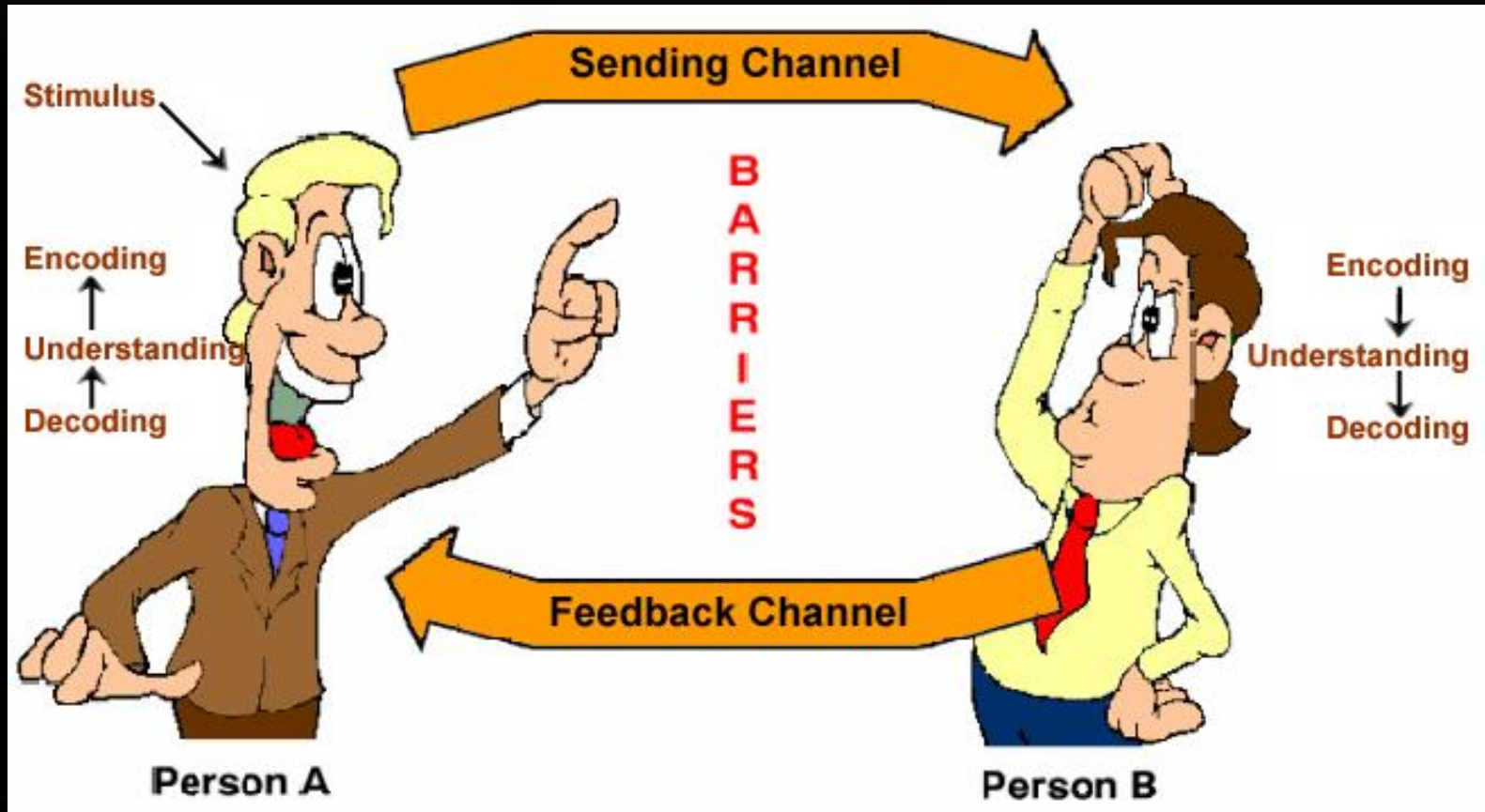


The Communication Process

Basic Model

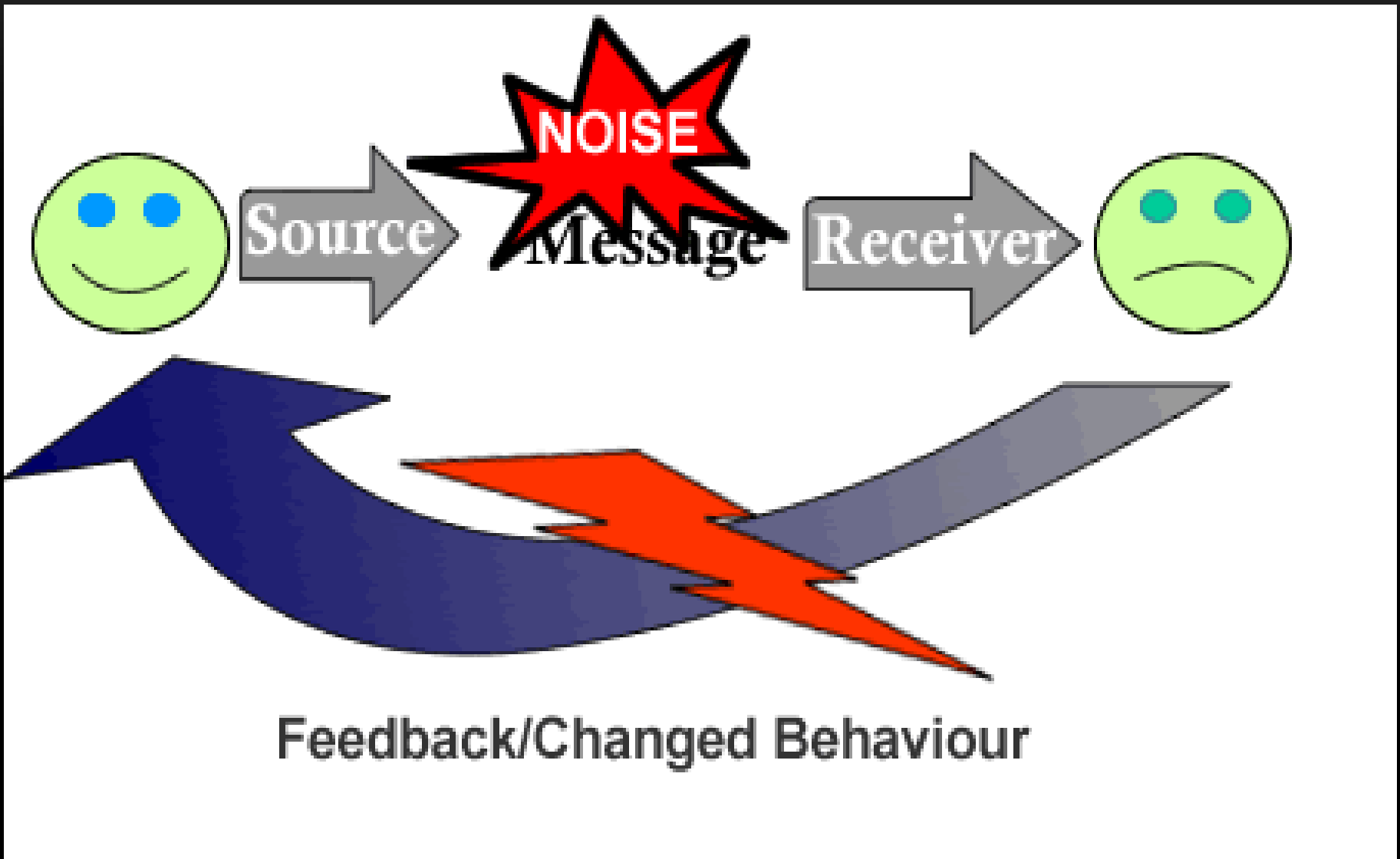


The Communication Process Expanded Model



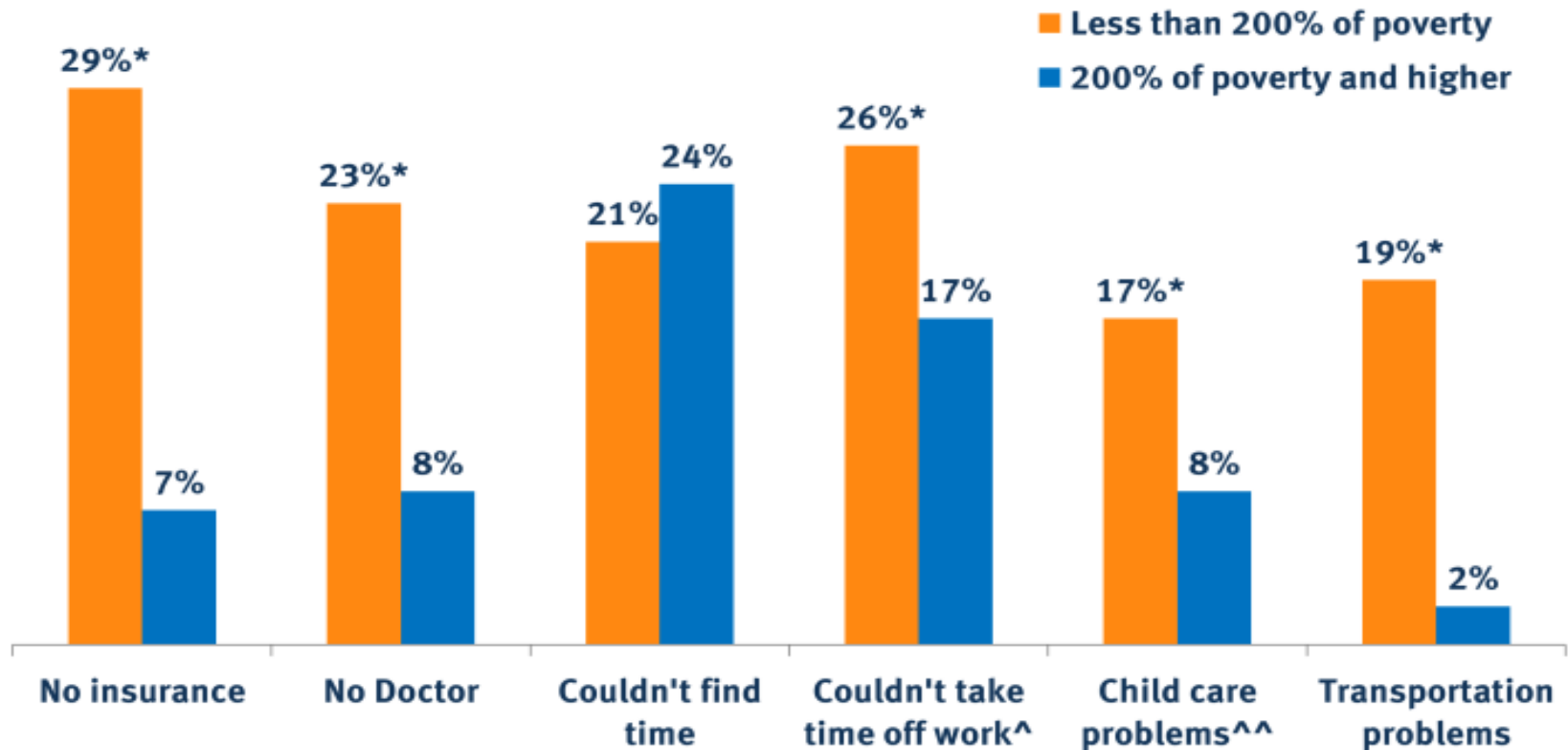
Barriers to Communication

Barriers to Communication



Women Experience Multiple Barriers to Health Care

Percent reporting they delayed or went without care they thought was needed in past 12 months due to:



NOTE: *Significantly different ($p < .05$). 200% of the federal poverty threshold was \$35,200 for a family of three in 2008.

[^]Among women who are employed. ^{^^} Among women with children younger than 18 years living in household.

SOURCE: Kaiser Family Foundation, 2008 Kaiser Women's Health Survey.

Barriers to communication

- A lack of skill and understanding of the **structures of conversational interaction**.
- Doctors **undervaluing the importance of communicating**.
- **Negative attitudes** of doctors towards communication.
- A **lack of inclination to communicate** with patients.
- **Lack of knowledge about the illness/condition** or treatment.
- **Human failings**, such as tiredness and stress
- **Inconsistency** in providing information
- **Personality differences** between doctors and their patients.

Reference: Communication skills education for doctors: an update

Barrier

cont.

- Organizational Barriers
- Gender differences
- Cultural differences
- Language differences
- Literacy differences
- etc

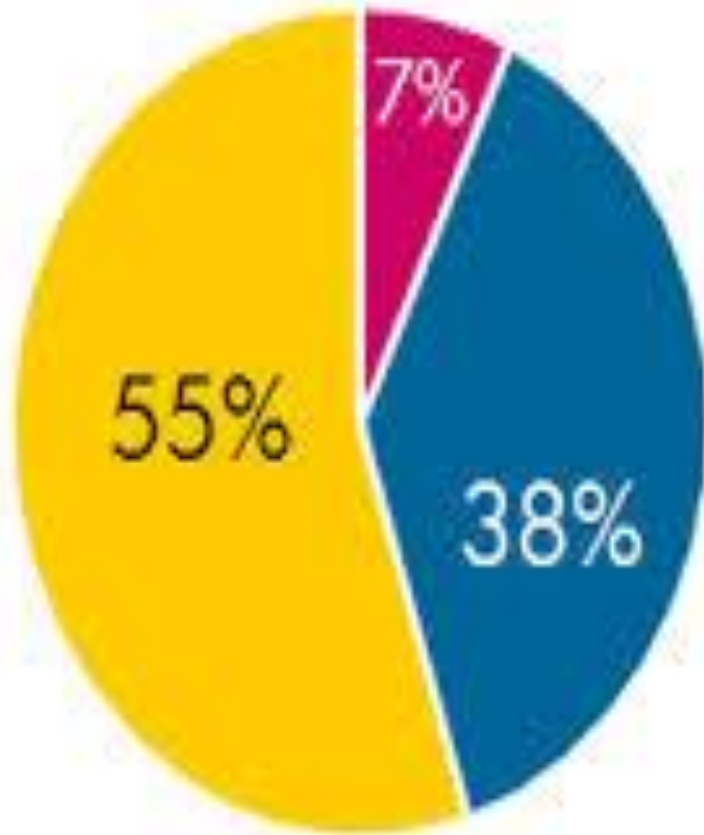
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Question

What percentage of role do Words and Body Language have in communication?

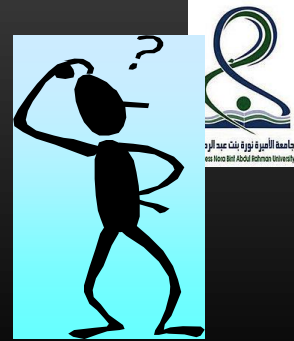
Albert Mehrabian



Elements of Personal Communication

- 7% spoken words
- 38% voice, tone
- 55% body language

Tools of Communication:



Non Verbal

LINGUISTIC
(Verbal)

Written

Oral

(Body Language)
Eye contact,
facial
expressions,
gestures,
postures

**PARA
LINGUISTIC-**
Pitch, rate,
loudness, tone,
stresses &
pauses

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" Everyone smiles in the same language."

-Author Unknown



Nonverbal Communication

1. Kinesics (body motion)
2. Haptics (touch)
3. Physical appearance
4. Artifacts
5. Paralanguage
6. Silence
7. Environmental factors
8. Proxemics and personal space
9. Chronemics (time)



**Everything
except the
words!**

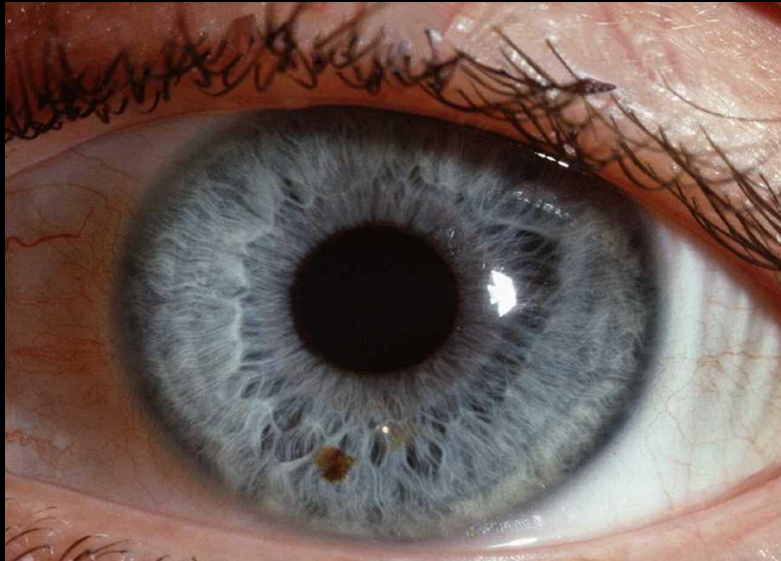
1-Kinesics

Body positions and movement including those of the face

- Posture can signal self-assurance.
- Posture can tell others if we are open to interaction.
- How a patient enters, walks, stand and sits down shows many things about him/her

Eyes

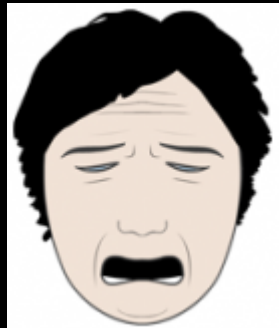
“The mirrors of the soul”



Microsoft Photo

- We tend to look at eyes to judge
 - Emotions
 - Honesty
 - Interest
 - Self-confidence
- **So look for them in a patient**

The Six Basic Facial Expressions



Ekman published in 1972

<http://education-portal.com/academy/lesson/ekmans-six-basic-emotions-list-definitions-quiz.html#lesson>

2- Haptics (touch)



- Touching and being touched are essential to a healthy life.
- Touch can communicate care and concern .



Gestures

Gestures include movement of the hands, face, or other parts of the body.



Wrong gestures can seem Harassment

- Creation of a hostile or uncomfortable environment
- Unwelcome gestures
- Body language
- Conversation

3- Physical Appearance



- What message do you wish to send with your choice of clothing and personal grooming?





4- Artifacts

**Personal objects we use to
announce our identities and
heritage and to personalize our
environments**



WINSOR(L-16") (S-14")



5- Paralanguage

Communication that is vocal but that does not use words themselves

- Sounds (gasps and murmurs)
- Vocal qualities
 - Volume
 - Rate
 - Pitch
 - Stresses and Pauses
- How we pronounce words
- Even Complexity of our sentences (using medical Jargon)

6- Silence

- Silence can be comforting.
 - You keep silent to let the patient talk.
- Silence can be a disconfirming symbol.
 - When you talk to the patient and they do not reply

7- Environmental Factors

- Elements of settings that affect how we feel and act
 - Architecture
 - Colors
 - Temperature
 - Sounds
 - Smells
 - Lighting

8- Proxemics

Bands of space extending outward from the body; comfort in proximity differs from culture to culture.

a = intimate <1.5'

Intimate distance used for very confidential communications

b = personal 1.5-4

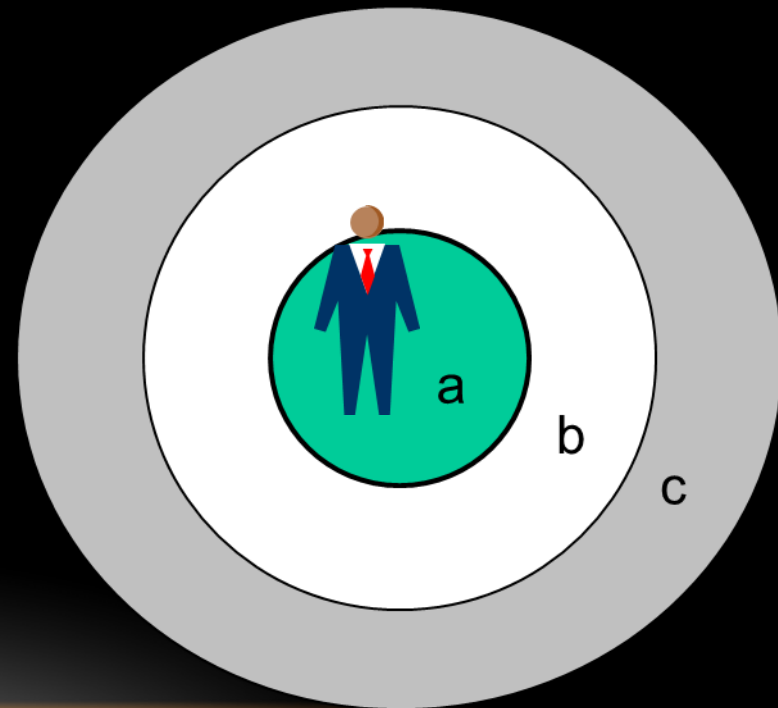
Personal distance used for talking with patients, family/close friends

c = social 4-12'

Social distance used to handle most official transactions

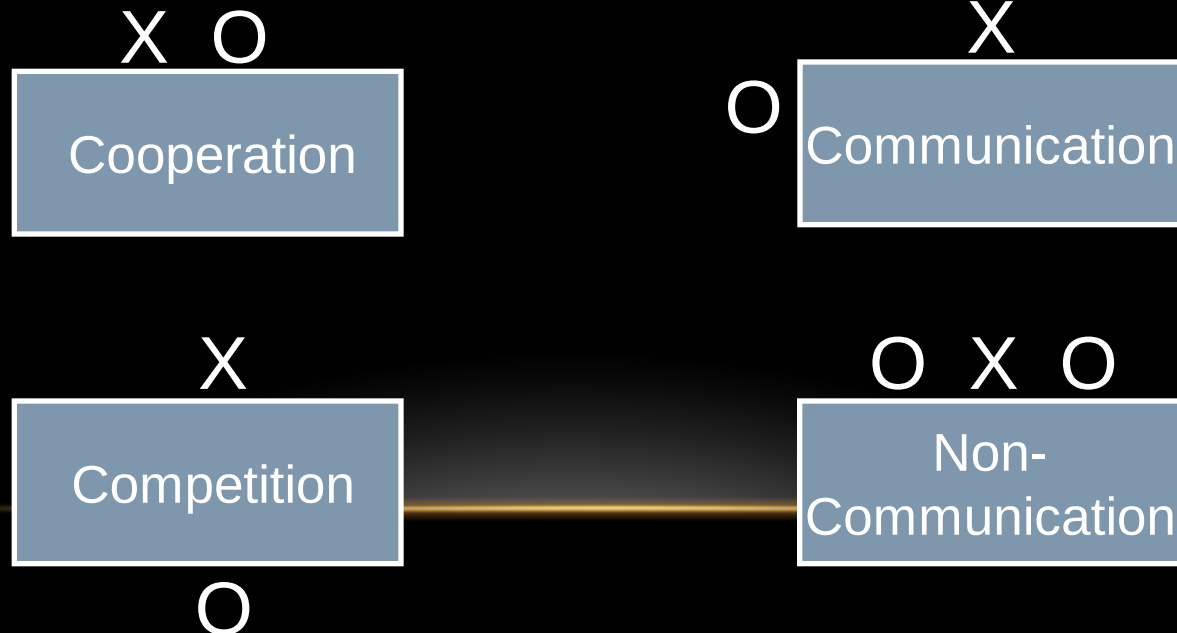
d = public >12

Public distance used when calling across room or giving talk to group



Proxemics: Seating Dynamics

Seating Dynamics - seating people in certain positions according to the doctor's purpose in communication



9- Chronemics (time)



- How do we manage and react to others' management of time
 - Duration
 - Punctuality

Interpretation of others Nonverbal Cues

- Observe and analyze
- Listen to the unsaid ... (posture, gesture, eye contact etc...)
- Be aware of cultural differences

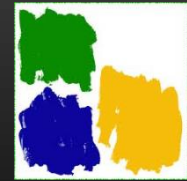
Colour Communication



- **Black is the color of authority and power.** It is popular in fashion because it makes people appear thinner. It is also stylish and timeless. Black also implies submission. Priests wear black to signify submission to God. Some fashion experts say a woman wearing black implies submission to men. Black outfits can also be overpowering, or make the wearer seem aloof or evil. Villains, such as Dracula, often wear black.
- **Doctors wear white to symbolize sincerity and purity. White reflects light and is considered a summer color.** White is popular in decorating and in fashion because it is light, neutral, and goes with everything. However, white shows dirt and is therefore more difficult to keep clean than other colors. Doctors and nurses wear white to imply sterility.
- **Red The most emotionally intense color, red gets notices very quickly. It is also the color of caution.** Red clothing gets noticed and makes the wearer appear heavier. Since it is an extreme color, red clothing might not help people in negotiations or confrontations. Red cars are popular targets for thieves. In decorating, red is usually used as an accent. Decorators say that red furniture should be perfect since it will attract attention.



Colour Communication



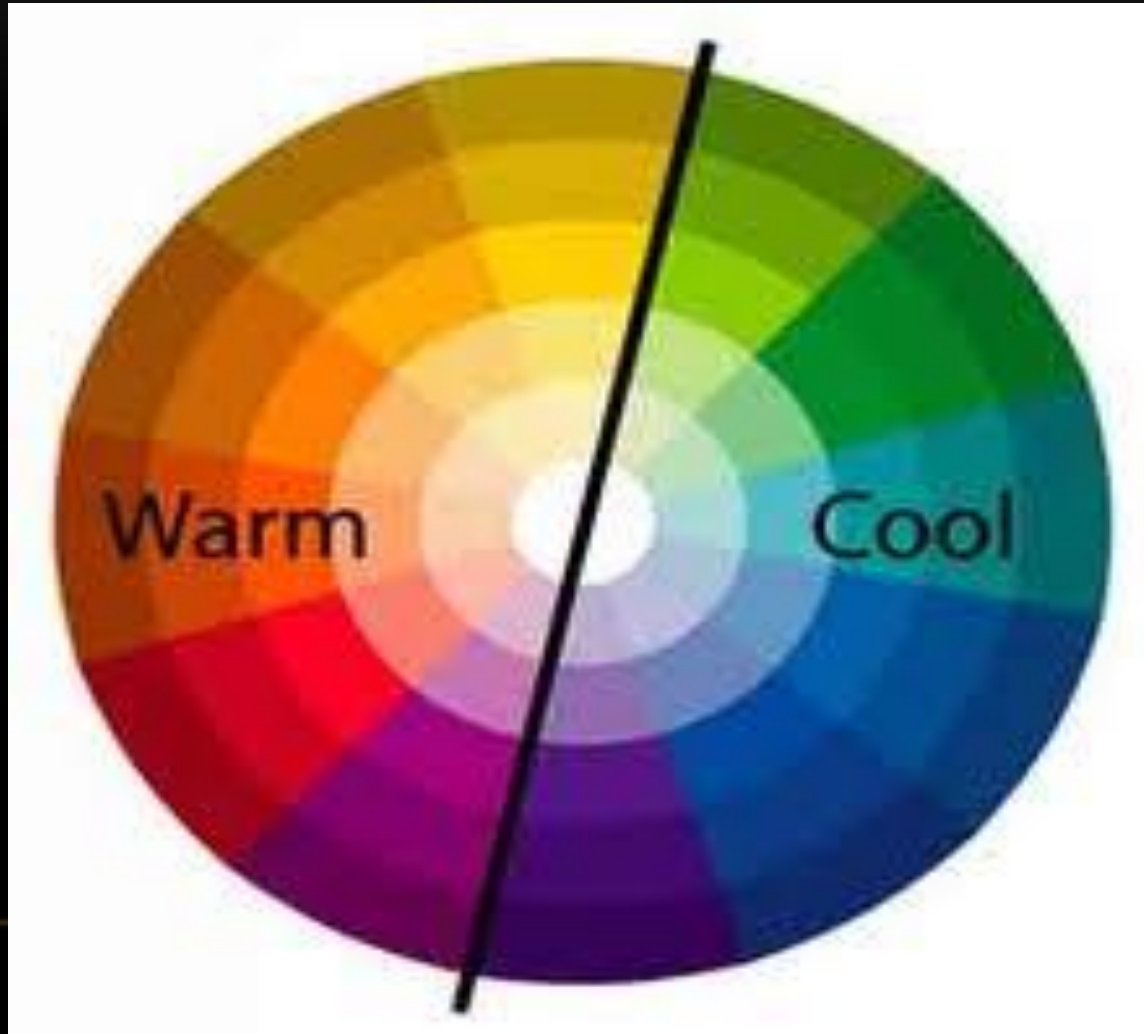
- **Blue** The color of the sky and the ocean. Peaceful, tranquil blue causes the body to produce calming chemicals, so it is often used in hospitals. Blue can also be cold and depressing. Fashion consultants recommend wearing blue to job interviews because it symbolizes loyalty. People are more productive in blue rooms. Studies show weightlifters are able to handle heavier weights in blue gyms.
- **Green** symbolizes nature. It is the easiest color on the eye and can improve vision. It is a calming, refreshing colour. Used in hospitals. People waiting to appear on TV sit in "green rooms" to relax. Hospitals often use green because it relaxes patients. Brides in the Middle Ages wore green to symbolize fertility. Dark green is masculine, conservative, and implies wealth. However, seamstresses often refuse to use green thread on the eve of a fashion show for fear it will bring bad luck.
- **Yellow** Cheerful sunny yellow is an attention getter. Used in children wards etc. While it is considered an optimistic color, people lose their tempers more often in yellow rooms. It is the most difficult color for the eye to take in, so it can be overpowering if overused. Yellow enhances concentration, hence its use for legal pads. It also speeds metabolism.

Colour Communication



- **Purple** The color of royalty, purple connotes luxury, wealth, and sophistication. Again used in **hospitals**. It is also feminine and romantic. However, because it is rare in nature, purple can appear artificial.
- **Brown** Solid, reliable brown is the color of earth and is abundant in nature. Light brown implies genuineness while dark brown is similar to wood or leather. Brown can also be sad and wistful. Men are more apt to say brown is one of their favorite colors.

Warm and Cool Colours



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Reflective Listening

- the skill of listening carefully to another person
- and Repeating it back to the speaker

This complex process needs to be divided to be understood



What I heard you say was we will understand the process better if we break it into steps

Reflective Listening

- Helps communicator clarify intended message and correct misunderstandings
- Emphasizes role of the receiver
- Especially useful in problem solving .. Communicationg to patients.

REFLECTIVE LISTENING

VERBAL

Affirm Contact

- Communicates attentiveness
- Provides reassurance in expressing thoughts and feelings

Paraphrase

- Reflects back to speaker what has been heard; assures accuracy
- Builds empathy, openness, acceptance

Clarify the Implicit

- Bring out unspoken (but evident) thoughts and feelings
- Builds greater awareness

Reflect “core” feelings

- Restate important thoughts and feelings
- Exercise caution; danger of overreaching

REFLECTIVE LISTENING

NONVERBAL

Silence

Speaker:

- Useful for thinking
- Determine how to express difficult ideas or feelings

Listener:

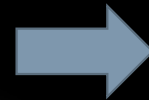
- Sort out thoughts and feelings
- Identify and isolate personal responses

Eye Contact

- Useful to open a relationship
- Improves communication
- Be aware of cultural differences
- Use moderate eye contact
- Use times of no eye contact for privacy and control

The Three Levels of Reflective Listening

- Repeating/rephrasing
- Paraphrasing
- Reflection of feeling



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BATHE Model of history taking

- **Background**
What's going on in your life right now?
- **Affect**
How is this affecting you? How do you feel about that?
- **Trouble**
What is troubling you most?
- **Handling**
How are you handling this?
- **Empathy**
I can understand that this must be difficult for you

Exercise – History Taking Role Play

- In groups of three take history from a patient having Diarrhoea OR Anemia
 - 1- Patient Speaker
 - 2- Doctor Reflective Listener
 - 3- Observer
- Take history from a patient ...
- Finally give feedback

Questions

- How would you differentiate between One way and Two way communication ?
- Describe the model of communication.
- What are the tools of communication and how do they relate to a doctors life?
- What role does non verbal play in the everyday life of a doctor?
- Whist is reflective listening and how can we improve your reflective listening?

References

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- **Joint Commission Resources (USA):** <http://www.jcrinc.com/>
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- **Centre of Research Excellence in Patient Safety (Australia):**
<http://www.crepatientsafety.org.au/>
Research: <http://www.crepatientsafety.org.au/research/>

Email: nmirza@pnu.edu.sa

Thank you